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DECLARATION FO	Attorney Docke	et Number	SDT_315				
DECLARATION FO	First Named In	ventor	Stephen F. Gass				
PATENT APPLICATION (37 CFR 1.63)		cc	COMPLETE IF KNOWN				
		Application Nun	nber				
X Declaration	Declaration	Filing Date					
Submitted OR with Initial	Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Group Art Unit					
Filing		Examiner Name	)				
As a below named inventor, I he	ereby declare that:						
My residence, mailing address, an	nd citizenship are as stal	ted below next to my nam	ie.				
I believe I am the original, first and names are listed below) of the sub	sole inventor (if only or	ne name is listed below) o	or an original,	first and joint inve	ntor (if plural		
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FILI	LEK SAW WIII I	MIROVED SAFETT	SISIEM				
	(Title of t	he Invention)					
the specification of which	•	·					
X is attached hereto							
OR							
was filed on (MM/DD/YYYY) as United States Application Number or PCT International							
					$\neg$		
Application Number and was amended on (MM/DD/YYYY) (if applicable).							
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.							
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.							
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claime		Copy Attached? NO		

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

## **DECLARATION** — Utility or Design Patent Application

Direct all correspondence to: X Customer Number or Bar Code Label 27630 OR Correspondence address below						
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Country U	S	Teler	ohone (503)	63	8-6201	Fax (503) 638-8601
are believed to made are punish	I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SO	OLE OR FIRST INVENTOR :		A petition h	as be	en filed for this un	signed inventor
Given Name (first and middle	(e[ifanx]) Stephen F.				ily Name Gass	
Inventor's Signature Date 8/8/0/				Date 8/8/01		
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City Wilsonville State OR		<b>ZIP</b> 97070	Country US			
NAME OF SE	ECOND INVENTOR:		A petition has	bee	n filed for this unsi	gned inventor
Given Name (first and middle [if any])  David S.  Family Name or Surname  D'Ascenzo						
Inventor's Signature Date 8/9/0/					Date \$/9/0/	
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	ortland		State OR	Z	<b>ZIP</b> 97219	Country US
X Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.						

Please type a plus sign (+) inside this box -	Please type a plus sign (+) inside this box -	+
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## **DECLARATION**

ADDITIONAL INVENTOR(S) Supplemental Sheet Page  $\underline{1}$  of  $\underline{1}$ 

Name of Additional Joint Inventor, if any:							
Given Name (first and middle [if any])			Family Name or Surname				
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City Vancouver	State WA	zip 98682 Country US			y US		
Name of Additional Joint Inventor, if any:   A petition has been filed for this unsigned inventor							
Given Name (first and middle [if any	)		Family	Name or S	urname		
Inventor's Signature					Date		
Residence: City State			Country		Citizenship		
Mailing Address							
Mailing Address							
			ZIP Country		intri		
Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor			s unsigned inventor				
Given Name (first and middle [if any]) Family Name or Surname				or Surname			
Inventor's Signature					Date		
Residence: City	ce: City State		Country		Citizenship		
Mailing Address							
Mailing Address							
City	State		ZIP C		Country		

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